

Office of Congressman John P. Sarbanes

Academy Information Sheet

1. Full Legal Name of Applicant _____

2. Permanent Address _____

3. I am a legal resident of Maryland's 3rd Congressional District. ____ Yes ____ No

4. Home Phone Number _____

5. Cell Phone Number _____

6. E-mail Address _____

7. Date of Birth _____

8. High School _____

9. Date of Graduation _____

10. Extracurricular Activities _____

11. Please check all academies that are of interest:

_____ U.S. Naval Academy

_____ U.S. Military Academy

_____ U.S. Air Force Academy

_____ U.S. Merchant Marine Academy

Please submit form by Mail or Fax to:

Office of Congressman John Sarbanes

600 Baltimore Ave, Suite 303

Towson, MD 21204

Phone: 410-832-8890

Fax: 410-832-8898